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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	10/628,282
Filing Date	07/25/2003
First Named Inventor	Michael F. Shapiro
Art Unit	2137
Examiner Name	Williams, Jeffery L.
Attorney Docket Number	089477 00002

P.O. Box 1450 Alexandria, VA									
·	e as attorney or agent for the above i	dentified	I patent app	lication, and					
all the attorneys/agents of record.									
the attorneys/agents (with registration numbers) listed on the attached paper(s), or									
√ the attorneys	agents associated with Customer Nu	mber		23456					
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.									
The reasons for this request are: This matter has been transferred to another attorney.									
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1. The correspondence address is NOT affected by this withdrawal.									
2. Change the correspondence address and direct all future correspondence to:									
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Firm or Individual Name	Jason I Hornkohl	•	***************************************	***************************************					
Address	P.O. Box 210584								
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Telephone),	(615) 673-6771			Email	ornkoh	i@hor	nkohl.com		
Signature 7 W	Whi								
Name Emily A. Shou	se		R	egistration N	lo. 44	,336			
Date March 17, 200	3			Telephone No. (615) 242-2400					
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time certod for response or possible extension period, the request to withdraw is normally disapproved.									

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proposa) an application, Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14 This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suppessions for reducing this burden, should be set for the Chief Information Cflience, U.S. Patent and Trastement Cflience, U.S. Patent Cflience, U.S. Patent St. Complete the Complete Cflience, U.S. Patent St. Complete Cflience, U.S. Patent Cflience, U.S. Patent St. Complete Cflience, U.S. Patent Cflience, ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.